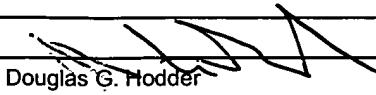


Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b>		<b>Complete if Known</b>					
<b>Fee TRANSMITTAL</b> <b>For FY 2005</b>		Application Number	10/086,155				
		Filing Date	February 26, 2002				
		First Named Inventor	Masaaki KATOH				
		Examiner Name	S. Hu				
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	2811				
<b>TOTAL AMOUNT OF PAYMENT</b> (\$ 1,020.00)		Attorney Docket No.	259052002900				
<b>METHOD OF PAYMENT</b> (check all that apply)							
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____							
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: 03-1952    Deposit Account Name: Morrison & Foerster LLP							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee					
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments					
<b>FEES CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
<b>Application Type</b> Utility Design Plant Reissue Provisional	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
	300	150	500	250	200	100	
	200	100	100	50	130	65	
	200	100	300	150	160	80	
	300	150	500	250	600	300	
200	100	0	0	0	0		
<b>2. EXCESS CLAIM FEES</b>				<b>Small Entity</b> <b>Fee (\$)</b> <b>Fee (\$)</b> 50                25 200              100 360              180			
<b>Fee Description</b>							
Each claim over 20 (including Reissues)							
Each independent claim over 3 (including Reissues)							
Multiple dependent claims							
Total Claims 5 - 27 = 0	Extra Claims x 50.00	Fee (\$) = 0.00	<b>Multiple Dependent Claims</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b> 360.00            0.00				
Indep. Claims 2 - 3 = 0	Extra Claims x 200.00	Fee (\$) = 0.00					
<b>3. APPLICATION SIZE FEE</b>				<b>Total Sheets</b> <b>Extra Sheets</b> <b>Number of each additional 50 or fraction thereof</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b> _____ - 100 = _____ /50 (round up to a whole number) x _____ = _____			
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>4. OTHER FEE(S)</b>				Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1253 Extension for response within third month    1,020.00			

SUBMITTED BY				
Signature			Registration No. (Attorney/Agent)	41,840
Name (Print/Type)			Date	Telephone (650) 813-4203
Douglas G. Hodder			June 30, 2005	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005</b> (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional)  259052002900																								
Application Number  10/086,155	Filed  February 26, 2002																									
For LIGHT-EMITTING DIODE AND ITS MANUFACTURING METHOD																										
Art Unit  2811	Examiner  S. Hu																									
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table border="1"> <thead> <tr> <th></th> <th><u>Fee</u></th> <th><u>Small Entity Fee</u></th> <th></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$120</td> <td>\$60</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$450</td> <td>\$225</td> <td>\$</td> </tr> <tr> <td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$1020</td> <td>\$510</td> <td>\$ 1020.00</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$1590</td> <td>\$795</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$2160</td> <td>\$1080</td> <td>\$</td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u> I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.</p> <p>I am the <input type="checkbox"/> applicant/inventor.  <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>41,840</u>  <input type="checkbox"/> attorney or agent under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34 _____</p> <p> Signature _____ Douglas G. Hodder Typed or printed name</p> <p>June <u>30</u>, 2005 Date (650) 813-4203 Telephone Number</p>				<u>Fee</u>	<u>Small Entity Fee</u>		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$	<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 1020.00	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
	<u>Fee</u>	<u>Small Entity Fee</u>																								
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<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$																							
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$																							
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.</p>																										

07/07/2005 RFEKADU1 00000091 031952 10086155

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